

Windsor-Essex County Board of Health
Regular Board Meeting Minutes
October 19, 2017 – 4:00 pm
33 Princess Street, 1st Floor Boardroom
Leamington, ON

Board Members Present:

Mr. Gary McNamara, Chair
Dr. Ken Blanchette, Vice-Chair
Mr. Paul Borrelli
Mr. Mark Carrick, Treasurer

Mr. Richard Meloche
Mr. Ed Sleiman
Ms. Michelle Watters

Board Member Regrets:

Mr. Joe Bachetti
Mr. Bill Marra
Dr. Carlin Miller

Mr. John Scott
Mr. Hilary Payne
Mr. Gordon Queen

Administration Present:

Ms. Theresa Marentette, Board Secretary
Dr. Wajid Ahmed
Ms. Nicole Dupuis

Ms. Kristy McBeth
Mr. Dan Sibley
Ms. Rosanne St. Denis

Administration Regrets:

Ms. Lorie Gregg

Ms. Lee Anne Damphouse

Guests:

Ms. Cathy Bennett, WECHU, Manager, Healthy Families
Ms. Chantelle Botscheller, WECHU, HPS, Healthy Families
Ms. Jyllian Mackie, WECHU, Emergency Preparedness Coordinator

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- 1.0 Call to Order
Board Chair, Gary McNamara, called the meeting to order at 4:16 p.m.
- 2.0 Announcements of Conflict of Interest
None declared.
- 3.0 Agenda Approval
The agenda was approved, and quorum officially met.
It was moved.
That the agenda be approved.
- 4.0 Approval of Minutes
4.1 Regular Board Meeting: September 21, 2017
It was moved.
That the meeting minutes presented be approved.

CARRIED

5.0 Presentations

5.1 C. Bennett, Manager, Healthy Families —BFI Preparation

C. Bennett, Manager, Healthy Families Department and C. Botscheller, Health Promotion Specialist were present to discuss preparation for the Baby Friendly Initiative external site assessment. The BFI process review, preparation of staff, promoting BFI in the community, and interview responsibilities of Board members were highlighted.

Assessors will be attending all three Health Unit sites from November 21-23, 2017. They will be interviewing staff, clients, and board members (management will need to provide board contact information and availability).

Board members were asked to become familiar with the handout distributed--10 Questions for In-Direct Care Staff: Expectations for BFI Pre-Assessment and Final Assessment should they be contacted by the Assessor. Board members were invited to the BFI Open House Health Fairs available at any of the three Health Unit sites.

5.2 Dr. Wajid Ahmed, Acting Medical Officer of Health, Emergency Preparedness – IMS and Emergency Response Plans

J. Mackie, Emergency Preparedness Coordinator for WECHU, provided a definition of 'emergency' with examples. She also discussed the role of public health and what an emergency for WECHU would look like using the Hazard Identification and Risk Assessment tool. She also explained other Public Health Emergency Planning tools used in the public health emergency management cycle--tools used to create WECHU's public health emergency preparedness plan.

The Board Chair advised that mock exercises have been particularly helpful in his municipality.

6.0 Consent Agenda

Management brought the Board's attention to WECHU's support and promotion of the Great Big Crunch initiative on page 10 of the board package,

It was moved

That the reports listed on the Consent Agenda as Items 6a to 6d be received.

7.0 Reports and Questions

A Board member queried why there was no mention in the BFI presentation about women who cannot lactate asking other women to breastfeed their child or children, common in Europe. Management responded that the BFI is a very structured policy that has prescribed language. Milk sharing can be addressed on an individual basis by WECHU's lactation consultants, however it is not something WECHU supports.

8.0 Business Arising-None

9.0 Media Coverage – Circulated

10.0 Board Correspondence – Circulated

11.0 New Business (30 min)

- 11.1 Report of the Minister’s Expert Panel—Leadership Team Response (T. Marentette)
Management highlighted the “Summary – Expert Panel Recommendations” handout, a flow chart summary of the Expert Panel Report recommendations. Management presented two documents in response to key parts of the Expert Panel Report. The first document is a summary of management’s comments on the four functions outlined in the report under a proposed integrated health system. (Optimal Organizational Structure for Public Health; Optimal Geographic Boundaries; Optimal Leadership Structure; and Optimal Approach to Governance). The second document focused on public health responsibilities and their functions. It noted the Expert Panel’s comments on regional responsibility, while management’s comments considered the local impact of moving from WECHU’s current state to a proposed regional model.

The Board Chair highlighted some of the challenges the Health Unit and the Board of Health will likely encounter moving to a regional model. Discussion ensued on the proposed governance structure.

The Health Unit will be submitting its feedback to the Ministry at the end of the month.

It was moved

That the report be received.

CARRIED

- 11.2 Association of Family Health Teams of Ontario Award – WECHU (N. Dupuis)
WECHU was nominated by the Association of Family Health Teams of Ontario to receive the Bright Lights Award in recognition of leadership in public health and primary care collaboration. This is a nice acknowledgement from local providers. N. Dupuis will be going to Toronto next week to accept the award on WECHU’s behalf. The Board asked N. Dupuis to extend congratulations and appreciation for a job well done.
- 11.3 Board Elections – Audit Committee (G. McNamara)
The Board Chair announced elections to fill a vacancy on the Audit Committee. Four written nominations were received. Michelle Watters was nominated by E. Sleiman, M. Carrick, P. Borrelli, and Dr. K. Blanchette. The Board Chair asked for nominations from the floor (three times). There being none, nominations were closed. M. Watters accepted the nomination and was proclaimed a member of the Audit Committee.

11.4 Provincial Nuclear Emergency Response Plan—WECHU Resolution (W. Ahmed) -
For Support

The resolution speaks to the uniqueness of our area. Every nuclear plant has measures within their nuclear plan that indicates what needs to be done in the case of a nuclear fallout. From a health unit perspective our situation is unique as nearby nuclear plants are in the U.S. The Ministry is looking at updating and renewing their plans. This health unit is asking that our area receive the same amount of money and support as other areas of the province.

It was moved

That the resolution be supported.

CARRIED

WHEREAS the Government of Ontario has asked for the public and community organizations to provide recommendations on how it should update the province's Provincial Nuclear Emergency Response Plan and,

WHEREAS the entirety of Windsor-Essex County are in close proximity to the Michigan-based Fermi 2 nuclear station and the Ohio-based Davis Besse nuclear station;

Now therefore be it resolved that the Windsor-Essex County Health Unit submits the following recommendations to the Government of Ontario to ensure communities living in proximity to the Fermi 2 and Davis Besse nuclear stations be accorded the same level of public safety as communities living near the Ontario based nuclear stations.

The following are the recommendations to the Government of Ontario regarding the Provincial Nuclear Emergency Response Plan:

1. Include the Ohio-based Davis Besse nuclear station in the Provincial Nuclear Emergency Response Plan;
2. Include requirements for the pre-distribution and availability of potassium iodide pills for communities living in proximity to the Fermi 2 and Davis Besse nuclear stations;
3. Ensure funding mechanisms are in place for communities in proximity to US nuclear stations in order to carry out the public education, planning, pre-distribution, and availability of potassium iodide pills for distribution;
4. Include a reliable funding mechanism to support all aspects of emergency preparedness for communities in Southwestern Ontario affected by non-Ontario based nuclear reactors;
5. Require provincial and municipal authorities to regularly identify vulnerable communities within provincial nuclear response zones and prepare emergency measures adapted to the needs of such vulnerable communities;
6. Ensure adequate measures are in place to protect drinking water in the event an accident on Canadian or American-based reactor contaminates the Great Lakes;
7. Ensure that the Province recognizes the public's expectation for meeting or exceeding international best practices for nuclear emergency planning where feasible;

8. Ensure that the Province conducts studies and modeling on the possible effects of a US type reactor emergency, which differ from Canadian nuclear reactors, and could release more radioactivity in the event of a severe accident; and,
9. Ensure that the Province provides regular updates to designated and impacted municipalities and community organizations on the Provincial Nuclear Emergency Response Plan revision process in order to improve transparency and accountability for nuclear emergency planning.

11.5 Cannabis—WECHU Resolution (N. Dupuis) – For Support

Management asked the Board to adopt the resolution which will support the Health Unit being involved in planning for the legalization of cannabis by attending the municipalities and being engaged as they consider what needs to be done e.g. smoke-free public places. Management also recommended the resolution go forward to the Minister. It is hoped that the Ministry will provide funding to support the public health approach.

It was moved

That the resolution be supported.

CARRIED

WHEREAS the federal government has announced its intention to legalize recreational cannabis through the passing of the Cannabis Act prior to July 1st, 2018, and

WHEREAS cannabis smoke contains many of the same carcinogens, toxins, and irritants found in tobacco smoke with the added psychoactive properties of cannabinoids like THC, and

WHEREAS increased access to cannabis will result in increased risk for chronic disease, mental illness, and injury, and

WHEREAS municipalities have control over the density and location of retail outlets through zoning, planning, and licensing regulations,

Now therefore be it resolved that the Windsor-Essex County Board of Health for the Windsor-Essex County Health Unit encourages all Windsor-Essex municipalities to develop strict licensing, planning, and zoning regulations related to the location and density of cannabis retail outlets particularly in areas where vulnerable populations may be unfairly targeted.

FURTHER that staff of the Windsor-Essex County Health Unit work with enforcement agencies and municipalities to provide a public health perspective into decision making related to the enforcement of cannabis smoking in prohibited areas.

FURTHER that staff of the Windsor-Essex County Health Unit utilize the Lower-risk Cannabis Use Guidelines set out by key national stakeholders, like the Centre for Addictions and

Mental Health and the Canadian Public Health Association, in the development of a comprehensive public education and awareness campaign.

AND FURTHER that this resolution be shared with the Honorable Prime Minister of Canada, local Members of Parliament, the Premier of Ontario, local Members of Provincial Parliament, Minister of Health and Long-term Care, Federal Minister of Health, the Attorney General, Chief Medical Officer of Health, Association of Local Public Health Agencies, Ontario Boards of Health, Ontario Public Health Association, the Centre for Addiction and Mental Health, and local community partners.

11.6 Q3 Operational Plan Report (K. McBeth)

The report covers Health Protection and Promotion activities for Quarter 3. It presents the status of each, the distribution, and any activities that had variances. There are 86 activities planned in the fourth quarter.

It was moved

That the report be received.

CARRIED

12.0 Board of Health Resolutions/Letters

12.1 Ontario's Safe and Sensible Framework to Manage Federal Legalization of Cannabis – Peterborough Public Health Letter to The Honourable Yasir Naqvi, Attorney General of Ontario (N. Dupuis) – For information

It was moved

That the letter be received.

CARRIED

12.2 Middlesex-London Health Unit Fluoride Varnish Program (N. Dupuis) – For Support

It was moved

That the Board support.

CARRIED

13.0 Committee of the Whole, CLOSED SESSION, in accordance with Section 239 of the Municipal Act

It was moved

That the Board move into Committee of the Whole at 5:43 pm

CARRIED

It was moved

That the Board move out of Committee of the Whole at 5:46 pm

CARRIED

14.0 Next Meeting: At the Call of the Chair or November 16, 2017 @ 4:00 pm in Essex, ON

15.0 Adjournment

The meeting adjourned at 5:52 pm

RECORDING SECRETARY:

SUBMITTED BY:

Acting CEO, Director of Health Protection
and Chief Nursing Officer, Board Secretary

APPROVED BY:

Chairperson